

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 290 / 334

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

**A.** Full Name (Last, First, Middle Initial)  
Mike Ross For Congress Committee

Mailing Address PO Box 360

City Prescott State AR Zip Code 71857

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Michael A. Ross

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AR District: 04

Transaction ID: 22754141

Date of Disbursement

12 / 19 / 2007

Amount of Each Disbursement this Period

1450.00

**B.** Full Name (Last, First, Middle Initial)  
House Conservatives Fund

Mailing Address P.O. Box 2752

City Washington State DC Zip Code 20013

Purpose of Disbursement

011  
Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 22754139

Date of Disbursement

12 / 19 / 2007

Amount of Each Disbursement this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
The Rely On Your Beliefs Fund

Mailing Address 209 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Void - The Rely On Your Beliefs Fund

011  
Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 23062906

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

-1500.00

Void - The Rely On Your  
Beliefs Fund

**SUBTOTAL** of Disbursements This Page (optional) .....

2450.00

**TOTAL** This Period (last page this line number only) .....